# NOTICE OF FILING/CLAIM FEE(S) DUE

## TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: _____

## Total Fee Calculation

| | Fee Code Sm./Lg. | Total # Claims | Number Extra | X | Fee Sm. Entity | Fee = Lg. Entity | Total |
|---|---|---|---|---|---|---|---|
| Basic Filing Fee | 201/101 | | | | | 790 | 790.00 |
| Total Claims >20 | 203/103 | 23 | -20 = 3 | X | | 22 | 66.00 |
| Independent Claims >3 | 202/102 | 3 | -3 = | X | | | |
| Mult. Dep Claim Present | 204/104 | | | | | | |
| Surcharge | 205/105 | | | | | 130 | 130.00 |
| English Translation | 139 | | | | | | |

## TOTAL FEE CALCULATION

986

Fees due upon filing the application:

Total Filing Fees Due = $ __986.00__

Less Filing Fees Submitted  - $ _____

BALANCE DUE  = $ __986-00__

_J. Nobo_ (signature)

Office of Initial Patent Examination